

County: Kenosha
WOODSTOCK HEALTH & REHABILITATION CENTER
3415 NORTH SHERIDAN ROAD

Facility ID: 9590

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KENOSHA 53140 Phone:(262) 657-6175
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 130
Total Licensed Bed Capacity (12/31/02): 173
Number of Residents on 12/31/02: 126

Ownership:
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 121

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No						44.4			
Supp. Home Care-Personal Care	No						48.4			
Supp. Home Care-Household Services	No		Developmental Disabilities	0.0	Under 65	8.7	More Than 4 Years			7.1
Day Services	No		Mental Illness (Org./Psy)	3.2	65 - 74	20.6				-----
Respite Care	No		Mental Illness (Other)	3.2	75 - 84	31.7				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	35.7	*****			
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.2	Full-Time Equivalent			
Congregate Meals	No		Cancer	0.0		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No		Fractures	7.9		100.0	(12/31/02)			
Other Meals	No		Cardiovascular	15.9	65 & Over	91.3	-----			
Transportation	No		Cerebrovascular	9.5		-----	RNs			
Referral Service	No		Diabetes	2.4	Sex	%	LPNs			
Other Services	Yes		Respiratory	16.7		-----	Nursing Assistants,			
Provide Day Programming for			Other Medical Conditions	41.3	Male	31.0	Aides, & Orderlies			
Mentally Ill	No			-----	Female	69.0				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	20	100.0	273		74	92.5	110	7	100.0	138	15	100.0	178	0	0	0.0	0	4	100.0	178	120	95.2
Intermediate	---	---	---		6	7.5	93	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0	0	6	4.8
Limited Care	---	---	---		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0	0	0	0.0
Personal Care	---	---	---		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0	0	0	0.0
Residential Care	---	---	---		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0.0	0	0	0.0
Total	20	100.0			80	100.0		7	100.0		15	100.0		0	0.0		4	100.0		126	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				

		% Needing				Total
Percent Admissions from:		Activities of	%	Assistance of	% Totally	Number of
Private Home/No Home Health	6.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	15.1	46.8	38.1	126
Other Nursing Homes	0.0	Dressing	16.7	45.2	38.1	126
Acute Care Hospitals	91.6	Transferring	31.0	46.0	23.0	126
Psych. Hosp.-MR/DD Facilities	0.8	Toilet Use	23.8	46.8	29.4	126
Rehabilitation Hospitals	0.0	Eating	71.4	18.3	10.3	126
Other Locations	0.8	*****				
Total Number of Admissions	262	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	7.9		Receiving Respiratory Care	7.1
Private Home/No Home Health	19.8	Occ/Freq. Incontinent of Bladder	63.5		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	4.8	Occ/Freq. Incontinent of Bowel	61.9		Receiving Suctioning	0.8
Other Nursing Homes	2.4				Receiving Ostomy Care	6.3
Acute Care Hospitals	47.2	Mobility			Receiving Tube Feeding	4.8
Psych. Hosp.-MR/DD Facilities	0.8	Physically Restrained	0.8		Receiving Mechanically Altered Diets	35.7
Rehabilitation Hospitals	0.0					
Other Locations	6.3	Skin Care			Other Resident Characteristics	
Deaths	18.7	With Pressure Sores	30.2		Have Advance Directives	69.0
Total Number of Discharges		With Rashes	1.6		Medications	
(Including Deaths)	252				Receiving Psychoactive Drugs	55.6

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		This Facility		Ownership: Proprietary Peer Group		Bed Size: 100-199 Peer Group		Licensure: Skilled Peer Group	
		%		Ratio		%		Ratio	
								All Facilities	
								%	
Occupancy Rate: Average Daily Census/Licensed Beds	69.5	84.7	0.82	85.7	0.81	85.3	0.81	85.1	0.82
Current Residents from In-County	51.6	81.6	0.63	81.9	0.63	81.5	0.63	76.6	0.67
Admissions from In-County, Still Residing	9.9	17.8	0.56	20.1	0.49	20.4	0.49	20.3	0.49
Admissions/Average Daily Census	216.5	184.4	1.17	162.5	1.33	146.1	1.48	133.4	1.62
Discharges/Average Daily Census	208.3	183.9	1.13	161.6	1.29	147.5	1.41	135.3	1.54
Discharges To Private Residence/Average Daily Census	51.2	84.7	0.61	70.3	0.73	63.3	0.81	56.6	0.91
Residents Receiving Skilled Care	95.2	93.2	1.02	93.4	1.02	92.4	1.03	86.3	1.10
Residents Aged 65 and Older	91.3	92.7	0.98	91.9	0.99	92.0	0.99	87.7	1.04
Title 19 (Medicaid) Funded Residents	63.5	62.8	1.01	63.8	1.00	63.6	1.00	67.5	0.94
Private Pay Funded Residents	11.9	21.6	0.55	22.1	0.54	24.0	0.50	21.0	0.57
Developmentally Disabled Residents	0.0	0.8	0.00	0.9	0.00	1.2	0.00	7.1	0.00
Mentally Ill Residents	6.3	29.3	0.22	37.0	0.17	36.2	0.18	33.3	0.19
General Medical Service Residents	41.3	24.7	1.67	21.0	1.96	22.5	1.83	20.5	2.01
Impaired ADL (Mean)	48.4	48.5	1.00	49.2	0.98	49.3	0.98	49.3	0.98
Psychological Problems	55.6	52.3	1.06	53.2	1.04	54.7	1.02	54.0	1.03
Nursing Care Required (Mean)	10.8	6.8	1.60	6.9	1.56	6.7	1.60	7.2	1.50